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APPLICATION NUMBER	FILING OR 371 (c) DATE	FIRST NAMED APPLICANT	ATTY. DOCKET NO./TITLE
10/668,843	09/22/2003	Michael Johnson	2098/US

CONFIRMATION NO. 4980

55714  
ST. JUDE MEDICAL, ATRIAL FIBRILLATION DIVISION  
14901 DEVEAU PLACE  
MINNETONKA, MN 55345-2126



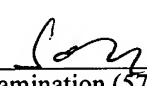
Date Mailed: 06/19/2007

## NOTICE OF ACCEPTANCE OF POWER OF ATTORNEY

This is in response to the Power of Attorney filed 06/06/2007.

The Power of Attorney in this application is accepted. Correspondence in this application will be mailed to the above address as provided by 37 CFR 1.33.

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Office of Initial Patent Examination (571) 272-4000, or 1-800-PTO-9199  
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